

PLAINTIFF'S EXHIBIT Y

PROPERTY INVENTORY - NO. 733941		UNIT NO. 5 NONE		INVENTORY NO. 733941	
CHICAGO POLICE FORM 10-21 (Rev 8/87)		CROSS REFERENCE K 5		NOTICE TO PROPERTY OWNER OR CLAIMANT	
DATE 24 FEB 90	MONTH FEB	YEAR 90	R.D. NO. N-08864	[] PROPERTY RELEASE ORDER (CPD 34 554) REQUIRED	
QUANTITY	DESCRIPTION	U.S.C. ONLY	RETURN TO THE POLICE STATION WHERE YOUR PROPERTY WAS TAKEN FROM YOU. GIVE THIS COPY TO THE DESK OFFICER IN CHARGE OF FORMS AND INSTRUCTIONS NECESSARY FOR THE RETURN OF YOUR PROPERTY.		
1	SCRAP OF PAPER WITH NAME OF BREE	5	UPON OFFICIAL NOTIFICATION THAT INVENTORIED PROPERTY IS AVAILABLE FOR RELEASE, THE SUBJECT OWNER OR CLAIMANT MUST PICK UP THE PROPERTY WITHIN 30 DAYS OF NOTIFICATION, OR THE PROPERTY WILL BE LEGALLY DISPOSED OF ACCORDING TO THE DIRECTION OF THE LAW.		
2					
3					
4					
5					
6					
7					
HOMICIDE CASE			TOTAL CASH U.S.C. 11		
EVIDENCE & RECOVERED PROPERTY SECTION USE ONLY					
EXHIBIT					
<input type="checkbox"/> ALL BOXES APPLICABLE <input type="checkbox"/> U.S. CURRENCY TO BE DEPOSITED <input type="checkbox"/> MISDEMEANOR <input checked="" type="checkbox"/> FELONY <input type="checkbox"/> U.S. CURRENCY TO BE HELD IN ORIGINAL FORM - DO NOT DEPOSIT - <input type="checkbox"/> STATE CHARGE(S) <input type="checkbox"/> JUVENILE <input type="checkbox"/> C.P.D. CONTINGENCY FUND MONEY <input checked="" type="checkbox"/> HOMICIDE <input type="checkbox"/> GAMBLING RAID SEIZURE <input type="checkbox"/> ARSON <input type="checkbox"/> MEDICAL EXAMINER'S PROPERTY <input type="checkbox"/> NARCOTICS & RELATED					
VERIFIED/SEIZED FROM NAME DECEASED OWNER'S NAME		AT ADDRESS		TELEPHONE	
JOHN DOE		1111 MASONIC HOSP			
JOHN DOE		ADDRESS		TELEPHONE	
FOUND BY CHECK C.P.D.		INVESTIGATING OFFICER - STAR NO. - UNIT KOWALSKI 16755 662		1st OFFICER'S NAME DET. D KOWALSKI	
PROPERTY OWNER NOTIFIED ON DAY MONTH YEAR TO PICK UP PROPERTY WITHIN 30 DAYS OR PROPERTY WILL BE DISPOSED OF		HOW NOTIFIED <input type="checkbox"/> IN PERSON <input type="checkbox"/> PHONE <input type="checkbox"/> MAIL		SIGNATURE D Kowalski	
TO BE DISPOSED OF BY CUSTODIAN (NOT TO BE RETURNED) (THIS APPLIES IF PROPERTY IS NOT EVIDENCE, NOT RETURNABLE AND/OR OWNER IS UNKNOWN)		INITIAL DESTINATION OF PROPERTY <input type="checkbox"/> MEDICAL EXAMINER <input type="checkbox"/> CRIME LABORATORY <input type="checkbox"/> AUTO POUND NO.:		2nd OFFICER'S NAME DET. R SPOLESKI 13491	
VIA <input checked="" type="checkbox"/> POLICE MAIL <input type="checkbox"/> RECOVERING UNIT PERSONNEL <input type="checkbox"/> E. & R.P.S. PICKUP		APPROVING DESK SERGEANT CL Steadman		STAR NO. 727 DATE 24 FEB 90 TIME 1230	
ARRESTEE INFORMATION SEIZURE WITHOUT SEARCH WARRANT (Ill. Rev. Stat. Chap. 38, Sec. 108 2) GIVE THIS COPY TO ARRESTEE IF NOT ACCEPTED, ATTACH TO COPY 3 SEIZURE WITH SEARCH WARRANT (Ill. Rev. Stat. Chap. 38, Sec. 108 10) ATTACH THIS COPY TO SEARCH WARRANT					

SAO 00566

COPY 4-GIVE OR SEND TO FINDER, ARRESTEE OR OWNER

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